



STATE OF TENNESSEE
TENNESSEE STUDENT ASSISTANCE CORPORATION
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MINORITY TEACHING FELLOWS PROGRAM

Type or print in ink. In order to have your application processed, all information must be received at TSAC by the April 15 deadline. See Additional Attachments required and checklist on the back of this application. The awards are highly competitive and subject to availability of funding.

1. Name _____
Last First Middle

2. Social Security No. _____

3. Date of Birth _____
Month Day Year

4. Are you a United States citizen? ____ Yes ____ No

5. Are you a legal resident of Tennessee? ____ Yes ____ No

6. County of Legal Residence _____

7. Permanent Address _____
Street City State Zip Code

8. Telephone Number (____) _____

9. E-Mail Address _____

10. Gender ____ Male ____ Female

11. Race _____
American Indian/Alaskan Native
Asian/Pacific Islander
Black
Other _____
Specify

____ Hispanic
____ White

12. Driver's License State _____ Number _____

13. What grade level are you applying for? ____ Freshman ____ Sophomore ____ Junior ____ Senior

HIGH SCHOOL INFORMATION

14. Where did or will you receive your diploma? _____
Name of High School

15. When did or will you graduate? _____
Month, Year

16. List your ACT Score _____ or SAT Score _____

17. What is your Grade Point Average on a 4.0 scale? _____

18. Your Class ranking is ____ out of ____

19. Attach separate sheet (s) showing all extracurricular activities in high school and college. Give the length of time you were a member. List all officer, chairperson, or leadership positions you held and the length of time you held them. Also, list evidences of your commitment that would indicate an interest in teaching.

COLLEGE INFORMATION

20. What Tennessee institution will you attend to earn your teaching credentials?

Name of College or University

21. Expected graduation date _____
Month, Year

22. Have you ever attended other colleges or universities? ____ Yes ____ No

23. If you answered Yes to #22 what is your GPA _____ and number of hours that you have completed _____

24. If you answered Yes to #22, list your previous colleges, graduation date, and degree earned.

Name of College/University

Degree Earned

Note: If you have received a bachelor’s degree, you are ineligible to apply for this award.
REFERENCE INFORMATION (All applicants must provide this information)

25. Name

LastFirstMiddle

26. Relationship to Applicant27. Home Telephone Number ()

28. Permanent Address

StreetCityStateZip Code

29. Employer30. Employer Telephone Number ()

31. Employer Address

StreetCityStateZip Code

CHECKLIST: Is the application complete and signed by applicant and school official? For high school applicants, is the high school transcript attached with at least seven semesters, SAT/ACT score, and the class rank documented? If the applicant attended college, is the college transcript attached? Are the four additional required documents (essay, 2 references, and extracurricular activities) attached? Are you mailing the complete application and all required attachments to arrive at TSAC by April 15? **Incomplete or late applications will not be considered.**

CERTIFICATION BY THE APPLICANT

I understand that this application must be completed in full and **received at TSAC by April 15** to be considered. I certify that I have read this application in full and it is accurate and complete to the best of my knowledge. I agree to provide, if requested, any other data necessary to verify such information. I authorize any educational institution that I attend to release to TSAC or to its agents any information requested by such persons pertinent to this award (i.e., enrollment status, current address, academic grades achieved, etc.). I affirm that any funds obtained as a result of this application will be used solely for the expenses related to attendance at the postsecondary educational institution that I attend. By submitting this application, I hereby declare my intent to teach at a Tennessee public school at some K-12 level. Prior to the receipt of the \$5,000 fellowship, I understand that I must enter into a promissory note that states the terms of the fellowship, which include teaching or repayment if I do not teach. I further understand that I will be eligible to receive the scholarship for more than one year, if I am a full-time student in teacher education with a 2.5 college grade point average. I understand that an incomplete application will not be considered.

SIGNATURE OF APPLICANT

DATE SIGNED

ADDITIONAL REQUIRED ATTACHMENTS: (1) High school applicant must attach an official high school transcript with seven semesters, SAT/ACT scores, and class rank **or** college applicants must attach an official college transcript. (2) Submit a three paragraph paper of less than 250 words on the topic “Why I Chose Teaching as a Profession” and (3) submit two reference letters: **a)** one from a community person who is not a member of the applicant's family and **b)** one from a teacher who taught the applicant in high school or college. The references should comment on the applicant’s interest in education, character, time known, and extracurricular activities. (4) Submit a separate sheet identifying extracurricular activities, leadership positions, and length of time involved.

CERTIFICATION BY SCHOOL OFFICIAL

I have reviewed the foregoing completed application. I hereby certify that, to the best of my knowledge, it is accurate and complete. I have informed the applicant that the high school transcript, college transcript (if applicable), and additional attachments are required with this application. Note: Please ensure that the grade point average, rank in class and ACT/SAT are on the transcript.

HIGH SCHOOL CERTIFICATION

SIGNATURE OF HIGH SCHOOL OFFICIAL

DATE SIGNED

PRINT NAME OF HIGH SCHOOL OFFICIAL

()HIGH SCHOOL TELEPHONE NUMBER

TITLE

COLLEGE/UNIVERSITY CERTIFICATION

SIGNATURE OF COLLEGE/UNIVERSITY OFFICIAL

DATE SIGNED

PRINT NAME OF COLLEGE/UNIVERSITY OFFICIAL

()COLLEGE/UNIVERSITY TELEPHONE NUMBER

TITLE

SA-0249 (Rev. 12/06)

RDA 2313